

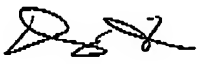
REMARKS

Applicants hereby elect Group 1, claims 1-31 without traverse.

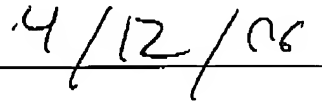
Should the Examiner wish to discuss this matter further, the Examiner is invited to call the undersigned at (408) 971-2573. For payment of any fees due in connection with the filing of this paper, the Commissioner is authorized to charge such fees to Deposit Account No. 50-2587 (Order No. HSJ920030129US1).

Respectfully submitted,

By: _____


Dominic M. Kotab
Reg. No. 42,762

Date: _____



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- 2 -